



# STATE OF IOWA

## IOWA DENTAL BOARD

TERRY E. BRANSTAD, GOVERNOR  
KIM REYNOLDS, LT. GOVERNOR

PHIL MCCOLLUM  
INTERIM DIRECTOR

### Dental Assistant Trainee Application

#### Application Form and Fee

Please find enclosed the application for dental assistant trainee status. Complete the trainee application and submit it to the office of the Iowa Dental Board.

**Please note:** Effective May 1, 2013, an active dental assistant trainee status must be issued by this office prior to a trainee starting work as a dental assistant. Please contact the Board office if you have an emergency situation that would require an expedited application review and issuance.

The fee for trainee status is \$25. Do not submit payment in cash. This fee is non-refundable.

In order to make application, you must be at least 17 years of age and a high school graduate. If you are a high school student enrolled in a cooperative education or work-study program through an Iowa high school, please contact the Board office for the appropriate trainee application form.

#### Personal Supervision by Licensed Dentist Required

*Dental assistant trainee status requires that you train and work under the personal supervision of a licensed dentist. Board rules state "personal supervision means the dentist is physically present in the treatment room to oversee and direct all intraoral or chairside services of the dental assistant and a licensee or registrant is physically present to oversee and direct all extraoral services of the dental assistant."*

#### Trainee Status Expiration Date – 12 Months from 1<sup>st</sup> Date of Employment.

Please note: Under the provisions of Iowa Code §153.39(5), "A person employed as a dental assistant after July 1, 2005, shall have a twelve-month period following the person's first date of employment after July 1, 2005 to comply with the provisions of subsection 1." This means that you must complete six months of training as a dental assistant, pass all required examinations and become registered prior to your Trainee Status Expiration Date.

Once your trainee application has been approved by the Board office, you will be sent a certificate of your official trainee status which will allow you to practice as a dental assistant trainee. With this confirmation you will be advised of the expiration date of this status. Trainee status shall not exceed twelve (12) months from your first date of employment as a dental assistant in Iowa. The confirmation letter you receive from the Board office will have your Trainee Status Expiration Date. **Prior to your Trainee Status Expiration Date you are required to:**

- a. Complete a Minimum of 6 months training. You must complete a minimum of six (6) months of training as a dental assistant trainee under the supervision of a licensed dentist.

b. Pass Examinations in Infection Control/Hazardous Materials and Jurisprudence. You must successfully complete a Board-approved course of study and examination in the areas of infection control/ hazardous materials and jurisprudence. If you have taken the DANB CDA or ICE exam after June 1991, you will not need to pass a separate state examination in infection control and hazardous materials, only the state exam in jurisprudence. The examination is available at a number of local community colleges. A list of testing sites is available at <http://www.dentalboard.iowa.gov/Forms/TestingSites.pdf>.

Upon receipt of the certificate of trainee status, you are authorized to sit for the required examinations. You are encouraged to test early. This will allow you time to complete remedial education, if necessary. By completing the examinations early in your trainee status, you would be eligible to apply for registration upon completion of your six months of employment and other requirements for registration.

c. Become Registered as a Dental Assistant. You must submit an application for registration to the Board office and become registered as a dental assistant.

*While trainee status is valid for practice for a maximum of twelve months, you are encouraged to complete the requirements for registration as soon as possible.* Applying for registration well in advance of your expiration date also gives you extra time to complete the application for registration, should your application be incomplete when submitted to the Board. Please note that you are eligible to apply for registration after you have at least six months of experience as a dental assistant and have met all other requirements for registration. Once you are fully registered, you no longer have to work under the personal supervision of a dentist.

### **Nurses and Dental Radiography**

Nurses licensed by the Iowa Board of Nursing are eligible to apply for trainee status to complete training in dental radiography. A licensed nurse should submit proof of current licensure with the Iowa Board of Nursing with the application for trainee status. Training in dental radiography must occur under the personal supervision of a licensed dentist.

### **On-The-Job Training Manual Available**

The Board has approved an on-the-job training manual. The trainee manual is available through the Board office for \$70. To order a manual, mark the appropriate box on page 2 of the dental assistant trainee application and submit the correct fee. You can also submit a separate request in writing along with the \$70 fee for each manual requested.

### **On-The-Job Training in Dental Radiography**

While on trainee status, you are also encouraged to train under the personal supervision of your employer dentist in the area of *dental radiography*. An on-the-job training manual in radiography is available as part of the Dental Assistant Trainee Manual. In addition to radiography training, you will also need to successfully complete an approved radiography exam in order to obtain your radiography qualification. If you have taken the DANB CDA or radiation exam (after 1986), you will not need to pass a separate state exam in radiography. Dental assistants are encouraged to make every effort to obtain their radiography training and pass a radiography exam while on trainee status.

*Be advised that if you do not train in dental radiography during this trainee status period, you will be unable to train on the job in dental radiography after you become registered. You must take a formal course of study from an accredited school for future qualification in dental radiography if you did not train in dental radiography while on dental assistant trainee status.*

### **Disclosure of Medical Conditions and Criminal History**

Be advised that the application for registration and radiography qualification asks about any medical conditions you have that might impair your ability to practice the profession.

The Board also considers criminal history when issuing registrations. As part of the application process you will be asked questions about your criminal history. If you have a criminal history you will be asked to provide documents such as copies of court documents, copy of compliance with court conditions, or certified copy of criminal history from DCI. The Board considers a number of factors including number and nature of the offense, time since the offense, whether or not you complied with all court ordered terms or conditions.

If you have any questions concerning this please notify the Board office. If either of these situations pertains to you there may be delays at the time of registration. We suggest you contact the Board office for information as to what documents may be necessary for registration. Contacting the Board office about either of these situations can avoid unnecessary delays at the time of registration. Delays could potentially prohibit you from working as a dental assistant if the Board has not issued registration prior to expiration of your dental assistant trainee status.

### **Contact Us**

If you have any questions, or need further assistance, please feel free to contact the Iowa Dental Board at (515) 281-5157 or [IDB@iowa.gov](mailto:IDB@iowa.gov).

### **Testing Sites**

A list of testing sites is available at <http://www.dentalboard.iowa.gov/Forms/TestingSites.pdf>.

Board website:

[www.dentalboard.iowa.gov](http://www.dentalboard.iowa.gov).



# APPLICATION FOR DENTAL ASSISTANT TRAINEE STATUS

## IOWA DENTAL BOARD

400 S.W. 8<sup>th</sup> Street, Suite D, Des Moines, Iowa 50309-4687

Ph. (515) 281-5157 <http://www.dentalboard.iowa.gov>

This form must be completed and returned to the Iowa Dental Board. Include the application fee of \$25. Do not submit payment in cash. ***The application fee is non-refundable.*** Complete each question on the application. If not applicable, mark "N/A."

### IDENTIFYING INFORMATION

Full Legal Name: (First, Middle, Last)					
Other Last Names Used: (e.g. maiden name, other married names)				Email Address:	
Home Address:					
City:		County:		State:	
Home Phone:		Home Fax:		Zip Code:	
				Gender: Female: <input type="checkbox"/> Male: <input type="checkbox"/>	
Social Security Number:		<b>Privacy Act Notice:</b> Disclosure of your Social Security Number on this license application is required by 42 U.S.C. § 666(a)(13), Iowa Code §§ 272J.8(1) and 261.126(1), and Iowa Code § 272D.8(1). The number will be used in connection with the collection of child support obligations, college student loan obligations, and debts owed to the state of Iowa, and as an internal means to accurately identify licensees, and may also be shared with taxing authorities as allowed by law including Iowa Code § 421.18.			
Date of Birth:		City of Birth:		State of Birth:	
				Country of Birth:	
Father's Full Name:				Mother's Full Name:	
Name of High School:		City:		State:	
				From: (Mo, Yr) To: (Mo, Yr) Diploma: <input type="checkbox"/> GED: <input type="checkbox"/>	
Name of College:		City:		State:	
				From: (Mo, Yr) To: (Mo, Yr) Type of Degree:	

Have you ever held a qualification in dental radiography issued by the Iowa Dental Board? ☐ Yes ☐ No.

Qualification number: \_\_\_\_\_. *If yes, contact the Board office for information on reinstating your radiography qualification.*  
If you are not qualified and you want to take x-rays, study the Radiography Manual and train under supervision of your dentist while under trainee status. You will also need to complete a radiography exam (DANB or Board radiography exam).

***If you are a licensed nurse in the state of Iowa, please attach proof of current licensure with the Iowa Board of Nursing.***

License Number: \_\_\_\_\_

### EMPLOYER'S CERTIFICATION

Name of employer:				Phone:	
Office address where dental assistant will train: (Street, city, state, zip code)				Fax:	
Dentist Iowa license number:				Date applicant will begin work as dental assistant:	
Office Use Only:	Fee:	Date issued:	Trainee #:	Exp. Date:	

## STATEMENT OF APPLICANT

I hereby certify that everything contained in this application is true and accurate to the best of my knowledge. I am a high school graduate and I am 17 years of age or older.

***I further state that I shall practice only under the personal supervision of the dentist listed on the front side of this application, who is licensed in this state. I understand that personal supervision means the dentist is physically present in the treatment room to oversee and direct the services of the dental assistant.*** I shall notify the Board within five days of the termination of such employment.

I understand that prior to my Trainee Status Expiration Date (12 months from first date of employment as a dental assistant), I am required to successfully complete a Board-approved course of study and examinations in the areas of infection control, hazardous materials and jurisprudence. The course of study may be taken at a Board-approved postsecondary school or on the job, using curriculum approved by the Board for such purpose. Evidence of meeting the training and examination requirement shall be submitted to the Board prior to my Trainee Status Expiration Date. I understand that in the event I am not registered before my Trainee Status Expiration Date, I will be prohibited from working as a dental assistant. Prior to my Trainee Status Expiration Date, I must apply to the Board to be reclassified as a registered dental assistant. Current certification in CPR (cardiopulmonary resuscitation) will be required at the time of registration.

I understand that while under trainee status I may also train in the area of dental radiography. I must also pass an approved radiography exam to obtain my radiography qualification. I understand that if I do not obtain my radiography training or pass a radiography exam while on trainee status, a formal course of study in radiography may be required to obtain my qualification in dental radiography at a later date.

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Date

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Signature of Dental Assistant Trainee

## STATEMENT OF EMPLOYER

I certify that the statements of the above applicant relating to employment of the trainee are true. ***I will also personally supervise the Dental Assistant Trainee and assist the trainee in learning the skills needed. I understand that personal supervision means the dentist, licensee or registrant is physically present in the treatment room to oversee and direct the services of the dental assistant.*** I also understand that prior to the Trainee Status Expiration Date (12 months from first date of employment as a dental assistant), the dental assistant trainee shall successfully complete Board-approved education and examinations in the areas of infection control, hazardous materials, and jurisprudence. The trainee will also be required to show current certification in CPR at the time of registration. I understand that the dental assistant trainee will be prohibited from working as a dental assistant if the examinations are not successfully passed and if the trainee has not become registered before the Trainee Status Expiration Date. I will ensure the trainee has a current certificate of registration prior to working after expiration of trainee status. I also understand that the trainee is encouraged to train in dental radiography while on trainee status. If the assistant does not train in dental radiography and pass an approved radiography exam while on trainee status, I understand the trainee may be required to complete a formal course of study and examination in radiography to obtain qualification to take dental x-rays at a later date.

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Date

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Dentist's Signature

\_\_\_\_\_ Please send me the on-the-job Dental Assistant Training Manual. I have enclosed the fee of \$70 made payable to the Iowa Dental Board.

***Attach copies of your examination results if you have already completed the DANB CDA, ICE or Radiation Safety examinations.***

## Dental Assistant Registration Checklist – New Trainees

- ☐ Certificate of Dental Assistant Trainee Status form received from Board office (Post this certificate in your dental office. )
- ☐ Study the Dental Assistant Trainee Manual – the manual and exams must be completed by your Trainee Status Expiration Date (12 months from your first date of employment as a dental assistant).
- ☐ If you also want to be able to take x-rays: Study the radiography portion of this manual and train for dental radiography under the supervision of a dentist. You must be 18 years of age to train in radiography.
- ☐ Schedule the infection control, jurisprudence, and radiography exams (allow 10 days for scheduling).
- ☐ Successfully complete Board infection control exam or Dental Assisting National Board Infection Control Examination prior to your Trainee Status Expiration Date.
- ☐ Successfully complete jurisprudence exam prior to your Trainee Status Expiration Date.
- ☐ Successfully complete Board radiography exam, or Dental Assisting National Board Radiation Health and Safety exam, prior to your Trainee Status Expiration Date if you intend to apply for a qualification in dental radiography.
- ☐ Obtain certification in CPR prior to your Trainee Status Expiration Date (CPR must be taken from a nationally recognized provider. No special “level” or other type of CPR is required.).
- ☐ Apply for registration certificate and radiography qualification. This may be done: a) no later than your Trainee Status Expiration Date; or b) if you are a graduate of a dental assisting program, you may apply after obtaining CPR and completing the exams; or c) once you have six (6) months of dental assisting experience, you may also apply immediately after obtaining CPR and completing the exams. If you worked as dental assistant out of state and you have a total of six months of dental assisting experience within the past two years, you may apply for registration in Iowa.
- ☐ Be Advised! If you do not obtain your radiography qualification at the same time as your registration certificate, you will need to submit a separate application and fee once you have met the radiography requirements. If you trained in radiography while on trainee status, you must successfully complete the exam and apply for your certificate within two years. If you did not train in radiography while on trainee status or do not apply for your radiography qualification within two years, you will be required to complete a formal course of study (e.g. at a community college) and pass a radiography exam to obtain your qualification at a later date.
- ☐ IMPORTANT! *You cannot work as a dental assistant if trainee status has expired and you have not been issued registration status.*

All application forms are available on the Board website at [www.dentalboard.iowa.gov](http://www.dentalboard.iowa.gov).  
A list of testing sites is available at <http://www.dentalboard.iowa.gov/Forms/TestingSites.pdf>.